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PTO/SB/01 (8-96) (MODIFIED)

Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing

Attorney Docket Number	X-13240
First Named Inventor	Jason Scott Sawyer
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole Inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the Invention entitled:

HETEROCYCLE SUBSTITUTED DIPHENYL LEUKOTRIENE ANTAGONISTS

the specification of which
 is attached hereto
OR

was filed on
(MM/DD/YYYY)

09 November 2000

as United States Application Number or PCT International

Application
Number PCT/US00/30942 and was amended on
(MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or Inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached YES	Certified Copy Attached NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional applications(s) listed below.

Application Number(s) 60/164,703	Filing Date (MM/DD/YYYY) 11 November 1999	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

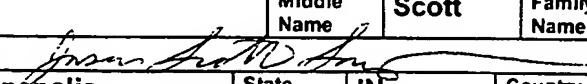
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Attorney Name	Reg. No.	Attorney Name	Reg. No.
Arvie J. Anderson	45,263	James J. Kelley	41,888
Lynn D. Apelgren	45,341	Paul J. Koivuniemi	31,533
Robert A. Armitage	27,417	Robert E. Lee	27,919
Brian P. Barrett	39,597	Kirby Lee	47,744
Michael T. Bates	34,121	James P. Leeds	35,241
Roger S. Benjamin	27,025	Nelsen L. Lentz	38,537
Gary M. Birch	48,881	Douglas K. Norman	33,267
William R. Boudreaux	35,796	Arleen Palmberg	40,422
Steven P. Caltrider	36,467	Thomas G. Plant	35,784
Paul R. Cantrell	36,470	Edward Prein	37,212
Charles E. Cohen	34,565	Grant E. Reed	41,264
Donald L. Comeglio	30,741	James J. Sales	33,773
Gregory A. Cox	47,504	Michael J. Sayles	32,295
Paula K. Davis	47,517	Robert L. Sharp	45,609
Elizabeth A. Dawalt	44,646	David M. Stemmerick	40,187
John C. Demeter	30,167	Mark J. Stewart	43,936
Manisha A. Desai	43,585	Robert D. Titus	40,206
Joanne Longo Feeney	35,134	Robert C. Tucker	45,165
Paul J. Gaylo	36,808	Tina M. Tucker	47,145
Francis O. Ginah	44,712	MaCham Vomdran-Jones	36,711
Janet A. Gongola	48,436	Gilbert T. Voy	43,972
Amy E. Hamilton	33,894	Thomas D. Webster	39,872
Frederick D. Hunter	26,915	Lawrence T. Welch	29,487
Thomas E. Jackson	33,064	Alexander Wilson	45,782
Charles Joyner	30,466	Dan L. Wood	48,613
Gerald P. Keleher	43,707	MaryAnn Wiskerchen	45,511

Additional registered practitioner(s) named on a supplemental sheet attached hereto.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor					
Given Name	Jason	Middle Name	Scott	Family Name	Sawy r	Suffix e.g. Jr.	
Inventor's Signature						Date	March 21, 2002
Residence: City	Indianapolis	State	IN	Country	USA	Citizenship	USA
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Post Office Address	SAME AS ABOVE						
City	Indianapolis	State	IN	Zip	46220	Country	USA



Additional Inventors are being named on supplement sheet(s) attached hereto.

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DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor						
Given Name	Douglas	Middle Name	Wade	Family Name	Bight		Suffix e.g. Jr.	
Inventor's Signature	<i>Douglas Wade Bight</i>					Date	March 22, 2002	
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Post Office Address	SAME AS ABOVE							
City	Frankfort	State	IN	Zip	46041	Country	USA	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor						
Given Name	Edward	Middle Name	CR	Family Name	Smith		Suffix e.g. Jr.	
Inventor's Signature	<i>Edward C. Smith</i>					Date	March 28, 2002	
Residence: City	Fishers	State	IN	Country	USA	Citizenship	USA	
Address	9969 Parkway Drive							
Post Office Address	SAME AS ABOVE							
City	Fishers	State	IN	Zip	46038	Country	USA	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor						
Given Name	William	Middle Name	Thomas	Family Name	McMillen		Suffix e.g. Jr.	
Inventor's Signature	<i>William Thomas McMillen</i>					Date	March 22, 2002	
Residence: City	Indianapolis	State	IN	Country	USA	Citizenship	USA	
Post Office Address	5823 Beatle Drive, Apt. 8							
Post Office Address	SAME AS ABOVE							
City	Indianapolis	State	IN	Zip	46216	Country	USA	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A Petition has been filed for this unsigned inventor						
Given Name		Middle Name		Family Name			Suffix e.g. Jr.	
Inventor's Signature						Date		
Residence: City		State		Country			Citizenship	
Post Office Address								
Post Office Address	SAME AS ABOVE							
City		State		Zip			Country	